## **SUPPLEMENT A**

## STATE OF RHODE ISLAND PHARMACY PLUS WAIVER APPLICATION

## SUMMARY OF STATE-FUNDED PROGRAMS PARTIALLY SUBSUMED BY PHARMACY PLUS WAIVER

## **Program Description**

**CMAP:** state-funded Community Medical Assistance Program, administered by the RI Department of Mental Health, Retardation and Hospitals, that provides residents with the high cost prescription medications necessary to treat chronic mental health conditions that otherwise would require institutional-level services.

**GPA:** state-funded program, administered by the RI Department of Human Services, that provides cash and medical assistance to individuals 19 and older who are incapacitated due to potentially disabling diseases and conditions that require therapeutic drug treatment.

**RIPAE** is the Rhode Island Pharmacy Assistance Program for the Elderly, the state-funded program administered by the RI Department of Elderly Affairs that subsidizes the cost of prescription drug medications for Rhode Island seniors who do not have Rx coverage -- i.e., uninsured or exhausted benefit.

	RIPAE	GPA	CMAP
ELIGIBILITY	Residents 65 and older	Incapacitated residents 19 to 64	Residents over age 18 w/chronic mental health conditions
1. Annual Income	@ 350% up to 420% FPL depending on family size	Under 100% FPL	No set income limit. Community Mental Health clinicians determine scope of need based on evaluation of drug costs and resources
<b>★</b> Single	\$37,167	\$327 per mos.	
<b>★</b> Couple	\$42,476	\$449 per mos.	
Asset limits	Not Applicable	\$400 per person	Not Applicable

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Income Disregards	Medical Expenses Up to 3% of Income	Not Applicable	Not Applicable	
2. Citizenship	Citizenship does not affect eligibility	Not Applicable	Not Applicable	
APPLICATION LOCATIONS	★Senior Centers  ★Community-based agencies  ★ Senior outreach organizations	<b>★DHS Offices</b>	★Community Mental Health Centers	
Rx BENEFIT	Limited Benefit – certain Rx medications are not covered	Limited Benefit – certain Rx medications are not covered	Only Medically Necessary Psychotropic Medications	
COST-SHARING	Point-of-Service co-payments for covered Rx medications that vary by income from 40% to 85%. Full cost for non-covered medications.	Not Applicable	None.	
Enrollee Co-pays S=Single Person MC=Married Couple	Level 1-40%: up to \$16,619 (S) up to \$21,149(MC)	Not Applicable	Not Applicable	
	Level 2-70%: \$16,920-21,238(S) \$21,150-26,548(MC)			
	Level 3-85%: \$21,239-37,167(S) \$26,549-42,476(MC)			
ENROLLMENT '02	34,000 w/average of 19,000 utilizing benefit per month	1,100	1,600	
PROGRAM COSTS '02	\$11.9 million	\$1,016,500	\$3.6 million	

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